

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	L.M.L		10-23-01
O.I.P.E. CLASSIFIER		113	11/3/01
FORMALITY REVIEW	TD	JC 1125	11/19/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 -+ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	10-23-01
1	10-23-01
2	10-23-01
3	10-23-01
4	10-23-01
5	10-23-01
6	10-23-01
7	10-23-01
8	10-23-01
9	10-23-01
10	10-23-01
11	10-23-01
12	10-23-01
13	10-23-01
14	10-23-01
15	10-23-01
16	10-23-01
17	10-23-01
18	10-23-01
19	10-23-01
20	10-23-01
21	10-23-01
22	10-23-01
23	10-23-01
24	10-23-01
25	10-23-01
26	10-23-01
27	10-23-01
28	10-23-01
29	10-23-01
30	10-23-01
31	10-23-01
32	10-23-01
33	10-23-01
34	10-23-01
35	10-23-01
36	10-23-01
37	10-23-01
38	10-23-01
39	10-23-01
40	10-23-01
41	10-23-01
42	10-23-01
43	10-23-01
44	10-23-01
45	10-23-01
46	10-23-01
47	10-23-01
48	10-23-01
49	10-23-01
50	10-23-01

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)

BEST AVAILABLE COPY